Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	 Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

rt 1:	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
You	r full name		
Write	e the name that is on	Kimiontae	
		First name	First name
exar	nple, your driver's	R	
		Middle name	Middle name
		Conley	
meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
you num Indi Iden	r Social Security aber or federal vidual Taxpayer tification number	xxx-xx-2639	
	You Writt your pictt exar licer Bring iden mee	Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Conley Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number About Debtor 1: Kimiontae First name Conley Last name and Suffix (Sr., Jr., II, III)

Debtor 1 Kimiontae R Conley

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs		
5. Where you live		726 St. Paul Dr.	If Debtor 2 lives at a different address:		
		East Saint Louis, IL 62206 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Saint Clair County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Debtor 1 Kimiontae R Conle			ey Case nu			Case numbe	number (if known)		
Par	t 2:	Tell the Court About \	our Bankrupto	y Case					
7. The chapter of the Bankruptcy Code you are choosing to file under					ion of each, see <i>No</i> p of page 1 and che			42(b) for Individuals Filir	ng for Bankruptcy
	CHOC	sing to me under	Chapter 7						
☐ Chapter 11									
			☐ Chapter 12						
			☐ Chapter 13						
8.	How	you will pay the fee	about ho order. If	w you may pay.	Typically, if you are	paying the f	fee yourself, you m	rk's office in your local co ay pay with cash, cashie ney may pay with a credi	r's check, or money
			I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).					Individuals to Pay	
			☐ I reques but is no applies t	t that my fee be t required to, wai o your family size	waived (You may note your fee, and mage and you are unable)	request this by do so only e to pay the	y if your income is I fee in installments	re filing for Chapter 7. B ess than 150% of the off). If you choose this option 3) and file it with your pe	icial poverty line that on, you must fill out
9.	bank	you filed for ruptcy within the years?	■ No.						
	iasi	years:	☐ Yes.	trict	,	When		Case number	
			Dis			When		Case number	
			Dis			When		Case number	
10.		ny bankruptcy s pending or being	■ No						
	filed not f you,	by a spouse who is ling this case with or by a business er, or by an	☐ Yes.						
			Deb	otor				Relationship to you	
				trict		When		Case number, if known	
			Det					Relationship to you	
			Dis	rict	<u> </u>	When		Case number, if known	
11.	Do y	ou rent your ence?	■ No. Go	to line 12.					
	resid	ence:	☐ Yes. Ha	s your landlord o	obtained an eviction	judgment a	gainst you?		
				No. Go to li	ne 12.				
					t <i>Initial Statement A</i> ptcy petition.	bout an Evi	ction Judgment Aga	ainst You (Form 101A) a	nd file it as part of

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Deb	otor 1 Kimiontae R Conl	ey			Case number (if known)	
Par	Report About Any Bu	sinesses	You Owr	as a Sole Proprie	tor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of bus	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any		
	If you have more than one sole proprietorship, use a		Numb	er, Street, City, Sta	te & ZIP Code	
	separate sheet and attach it to this petition.		Chec	k the appropriate bo	ox to describe your business:	
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	defined in 11 U.S.C. § 101(53A))	
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
				None of the above	e	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropleadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement, each-flow statement, and federal income tax return or if any of these documents do not exist, follow the process 11 U.S.C. 1116(1)(B).			
	For a definition of small	■ No.	I am i	not filing under Chap	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention	
	Do you own or have any	■ No.			,	
	property that poses or is alleged to pose a threat					
	of imminent and identifiable hazard to public health or safety?	imminent and entifiable hazard to		the hazard?		
	Or do you own any property that needs immediate attention?			liate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?		
					Number, Street, City, State & Zip Code	

Debtor 1 Kimiontae R Conley

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Kimiontae R Conley				Case number (if known)			
Part	6: Answer These Quest	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.		consumer debts? Consumer a rsonal, family, or household pur		.S.C. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.		business debts? Business deb			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you	owe that are not consumer deb	ts or business debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any available to distribute to unsecur		uded and administrative expenses	
	administrative expenses are paid that funds will		■ No				
	be available for distribution to unsecured creditors?		Yes				
18.		1 -49		1 ,000-5,000		5,001-50,000	
	you estimate that you owe?	□ 50-99		☐ 5001-10,000		0,001-100,000	
		□ 100-1 □ 200-9		□ 10,001-25,000	⊔ Мо	ore than100,000	
19.	How much do you	\$ 0 - \$	50 000	□ \$1,000,001 - \$10 m	illion 🔲 \$5	500,000,001 - \$1 billion	
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50	million	,000,000,001 - \$10 billion	
	ao montan		001 - \$500,000	□ \$50,000,001 - \$100 □ \$100,000,001 - \$50		0,000,000,001 - \$50 billion ore than \$50 billion	
		□ \$500,	001 - \$1 million	山 \$100,000,001 - \$50	o million 🗀 Mi	ore than \$50 billion	
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 - \$10 m	illion 🔲 \$5	500,000,001 - \$1 billion	
	estimate your liabilities to be?	+ / -	001 - \$100,000	□ \$10,000,001 - \$50		1,000,000,001 - \$10 billion	
			001 - \$500,000	□ \$50,000,001 - \$100 □ \$100,000,001 - \$50		10,000,000,001 - \$50 billion lore than \$50 billion	
		□ \$500,	001 - \$1 million	— \$100,000,001 - \$50	o million 🗀 ivi	iore triair \$50 billion	
Part	7: Sign Below						
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request	relief in accordance with the	chapter of title 11, United State	es Code, specified in this	s petition.	
			cy case can result in fines up	nt, concealing property, or obtain to to \$250,000, or imprisonment		by fraud in connection with a th. 18 U.S.C. §§ 152, 1341, 1519,	
		Kimion	tae R Conley tae R Conley of Debtor 1	Signat	ture of Debtor 2		
		Executed	d on April 10, 2019	Execu	ted on		
			MM / DD / YYYY		MM / DD / YYY	Υ	

	Case 19-30455-lkg	Doc 1	Filed 04/10/19	Page 7 of 57		
Debtor 1 Kimiontae R Co	nley		C	Case number (if known)		
7						
For your attorney, if you are represented by one	I, the attorney for the debtor(s) na under Chapter 7, 11, 12, or 13 of for which the person is eligible. I	title 11, United	States Code, and have	e explained the relief avai	lable under each chapter	
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4	4)(D) applies, (
	/s/ Andrew Stilinovic		Date	April 10, 2019		
	Signature of Attorney for Debtor			MM / DD / YYYY		
	Andrew Stilinovic 66606					
	Printed name					
	The Kline Law Firm, LLC					
	Firm name					
	125 North Main Street					
	Suite 100					
	Saint Charles, MO 63304					
	Number, Street, City, State & ZIP Code					

Email address

leigh@klinelawstl.com

Contact phone **636-352-2030**

66606 IL Bar number & State

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Fill	in this inforn	nation to identify your	case:			
Deb	otor 1	Kimiontae R Conl				
Deb	otor 2	First Name	Middle Name	Last Name		
(Spo	use if, filing)	First Name	Middle Name	Last Name		
Unit	ted States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT	T OF ILLINOIS		
	se numberown)				_	if this is an ded filing
~ (<i></i>	4000				
		rm 106Sum	and Liabilities o	nd Certain Statistical Information		12/15
Be a	ns complete a rmation. Fill or r original for	and accurate as possib out all of your schedule	le. If two married peoples first; then complete t	e are filing together, both are equally responsible the information on this form. If you are filing amend the box at the top of this page.	or supplyin	g correct
i ai	CT. Summ	dilze Toul Assets			Your as	ssets
						f what you own
1.	Schedule A 1a. Copy lin	VB: Property (Official Force 55, Total real estate, fr	orm 106A/B) om Schedule A/B		\$	0.00
	1b. Copy lin	e 62, Total personal prop	perty, from Schedule A/B.		\$	11,180.00
	1c. Copy lin	e 63, Total of all property	on Schedule A/B		\$	11,180.00
Par	t 2: Summ	arize Your Liabilities				
						abilities
					Amount	t you owe
2.			aims Secured by Property nn A, Amount of claim, at	y (Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	15,878.00
3.			Unsecured Claims (Official	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy th	ne total claims from Part 2	2 (nonpriority unsecured o	claims) from line 6j of Schedule E/F	\$	40,856.00
				Your total liabilities	\$	56,734.00
Par	t 3: Summ	arize Your Income and	Expenses			
4.		Your Income (Official Fo		e /	\$	2,110.63
5.		Your Expenses (Official nonthly expenses from lin			\$	2,173.00
Par	t 4: Answe	er These Questions for	Administrative and Stat	tistical Records		
6.	-	• • •	er Chapters 7, 11, or 13? on this part of the form. C	Check this box and submit this form to the court with you	our other sch	nedules.
7.	■ Yes What kind	of debt do you have?				
				debts are those "incurred by an individual primarily for 9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or
		lebts are not primarily our with your other schedu		eve nothing to report on this part of the form. Check th	is box and su	ubmit this form to

Official Form 106Sum

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Debtor 1 Kimiontae R Conley

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,249.44

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	24,774.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	24,774.00

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Fillin	this info	ormation to identify you	r case and this filing:			
Debto						
Debtoi	I I	Kimiontae R Col First Name	Middle Name	Last Name		
Debtoi (Spouse		First Name	Middle Name	Last Name		
` '						
United	States	Bankruptcy Court for the:	SOUTHERN DISTRICT	OF ILLINOIS		
Case r	number					☐ Check if this is an
						amended filing
O.(;;		1001/5				
		orm 106A/B				
<u>Scr</u>	<u>nedu</u>	ıle A/B: Prop	perty			12/15
think it i	fits best.	Be as complete and accur ore space is needed, attacl	ate as possible. If two marrie	once. If an asset fits in more than on ed people are filing together, both ar m. On the top of any additional page	e equally responsible for	supplying correct
Part 1:	Descri	be Each Residence, Buildin	g, Land, or Other Real Estate	e You Own or Have an Interest In		
1. Do y	ou own o	or have any legal or equitab	le interest in any residence,	building, land, or similar property?		
.	o. Go to F	2	-			
_		re is the property?				
	-	e is the property:				
Part 2:	Descri	be Your Vehicles				
□ N ■ Y	lo	nucks, nactors, sport t	itility vehicles, motorcycl			
3.1	Make:	Hyundai	Who has an inte	rest in the property? Check one		claims or exemptions. Put
	Model:	Elantra	Debtor 1 only			red claims on Schedule D: aims Secured by Property.
	Year:	2013	Debtor 2 only		Current value of the	Current value of the
		nate mileage: ormation:	Debtor 1 and [Debtor 2 only the debtors and another	entire property?	portion you own?
Ī	Outlot IIII	omaion.	At least one of	the deptors and another		
			Check if this (see instructions	is community property	\$9,000.00	\$9,000.00
Exar N □ Y 5 Add .pag	mples: B lo es d the do ges you Descril	oats, trailers, motors, persolate value of the portion have attached for Part 2	sonal watercraft, fishing ves you own for all of your e t. Write that number here	nal vehicles, other vehicles, and ssels, snowmobiles, motorcycle ac ntries from Part 2, including any e following items?	r entries for	\$9,000.00 Current value of the portion you own?
6 H an	ieahold	goods and furnishings				Do not deduct secured claims or exemptions.

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Schedule A/B: Property Official Form 106A/B

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D	ebtor 1	Kimiontae R	Conley Case number (if known)
	Yes.	Describe		
			Air Mattress, Furniture	\$1,000.00
7.	□No	es: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; phones, cameras, media players, games	music collections; electronic devices
			Laptop, Cell Phone	\$300.00
8.	Example No		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; star ons, memorabilia, collectibles	mp, coin, or baseball card collections;
9.	Example No	ent for sports ares: Sports, photo musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis;	canoes and kayaks; carpentry tools;
10	■ No		s, shotguns, ammunition, and related equipment	
11	□ No		othes, furs, leather coats, designer wear, shoes, accessories	
			All cothing and shoes	\$150.00
12	□ No		velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches Costume Jewelry	, gems, gold, silver \$30.00
13	Examp ■ No	rm animals bles: Dogs, cats,	pirds, horses	
14	■ No	her personal and	d household items you did not already list, including any health aids you did no prince or mation	ot list
1			of all of your entries from Part 3, including any entries for pages you have attac number here	shed \$1,480.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 2

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De	ebtor 1	Kimiontae	R Conle	/		Case number (if known)	
							claims or exemptions.
16.	■ No		,		home, in a safe deposit box, and	d on hand when you file your petition	on
17.					ccounts; certificates of deposit; sl nts with the same institution, list o	hares in credit unions, brokerage heach.	nouses, and other similar
	Yes				Institution name:		
			17.1.	Checking	Regions Bank		\$500.00
			17.2.	Savings	Regions Bank		\$200.00
18.				cly traded stocks ent accounts with	brokerage firms, money market a	accounts	
	Yes			Institution or issu	er name:		
19.	Non-put joint ve ■ No		stock and	interests in inco	rporated and unincorporated b	ousinesses, including an interes	t in an LLC, partnership, and
		Give specific in		about them me of entity:		% of ownership:	
20.	Negotia	ble instrumen	ts include	personal checks, o	egotiable and non-negotiable in cashiers' checks, promissory note transfer to someone by signing o	es, and money orders.	
	■ No □ Yes. G	ive specific in		about them uer name:			
21.	Retirem Example	ent or pension es: Interests ir	n accoun IRA, ERI	ts SA, Keogh, 401(k)), 403(b), thrift savings accounts,	or other pension or profit-sharing	plans
		ist each accou		tely. of account:	Institution name:		
22.	Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others						
	■ No □ Yes				Institution name or indi	vidual:	
23.	_	s (A contract	for a perio	dic payment of mo	oney to you, either for life or for a	number of years)	
	■ No □ Yes		ssuer nan	ne and description			
	26 U.S.C			n an account in a and 529(b)(1).	a qualified ABLE program, or u	nder a qualified state tuition pro	ogram.
	■ No □ Yes		nstitution	name and descrip	tion. Separately file the records o	of any interests.11 U.S.C. § 521(c):	
25.		equitable or f	uture inte	rests in property	(other than anything listed in I	line 1), and rights or powers exe	ercisable for your benefit
	■ No □ Yes. 0	Give specific in	nformation	about them			

Official Form 106A/B Schedule A/B: Property page 3

De	btor 1	Kimiontae R Conley	Case number (if known)	
		copyrights, trademarks, trade secrets, and other intellectual propes: Internet domain names, websites, proceeds from royalties and licen		
	☐ Yes. (Give specific information about them		
	Example ■ No	s, franchises, and other general intangibles es: Building permits, exclusive licenses, cooperative association holding Give specific information about them	gs, liquor licenses, professional license	es
Мо	ney or p	roperty owed to you?		Current value of the
	, ,	, , ,		portion you own? Do not deduct secured claims or exemptions.
	Tax refu ■ No	nds owed to you		
	□ Yes. G	ive specific information about them, including whether you already filed	the returns and the tax years	
	Family s Example ■ No	support es: Past due or lump sum alimony, spousal support, child support, mair	tenance, divorce settlement, property	settlement
ı	☐ Yes. G	ive specific information		
	Example 	nounts someone owes you es: Unpaid wages, disability insurance payments, disability benefits, sic benefits; unpaid loans you made to someone else	k pay, vacation pay, workers' comper	nsation, Social Security
	■ No □ Yes. 0	Give specific information		
		s in insurance policies es: Health, disability, or life insurance; health savings account (HSA); co	redit, homeowner's, or renter's insuran	nce
ļ	☐ Yes. N	ame the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
	If you ar someon	rest in property that is due you from someone who has died to the beneficiary of a living trust, expect proceeds from a life insurance to has died.	policy, or are currently entitled to rece	eive property because
	■ No □ Yes. 0	Give specific information		
33.		against third parties, whether or not you have filed a lawsuit or maes: Accidents, employment disputes, insurance claims, or rights to sue	de a demand for payment	
	■ No □ ves r	Describe each claim		
				ant off plaims
	Otner co ■ No	ontingent and unliquidated claims of every nature, including count	ercialms of the deptor and rights to	set off claims
ı	☐ Yes. [Describe each claim		
		ncial assets you did not already list		
	■ No □ Yes. 0	Give specific information		
36.		e dollar value of all of your entries from Part 4, including any entri t 4. Write that number here		\$700.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

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	G		•	
Debtor 1	Kimiontae R Conley		Case number (if known)	
37. Do yo	u own or have any legal or equitable interest in any business-related	l property?		
No.	Go to Part 6.			
☐ Yes.	Go to line 38.			
	Describe Any Farm- and Commercial Fishing-Related Property You C f you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. Do y	ou own or have any legal or equitable interest in any farm- c	or commercial fishin	ng-related property?	
■ N	o. Go to Part 7.			
☐ Y	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	ou have other property of any kind you did not already list? mples: Season tickets, country club membership			
■ No				
	s. Give specific information			
	o. Otto oposino information			
54. Add	d the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
	_			
Part 8:	List the Totals of Each Part of this Form			
55. Par	t 1: Total real estate, line 2			\$0.00
56. Par	t 2: Total vehicles, line 5	\$9,000.00		
57. Par	t 3: Total personal and household items, line 15	\$1,480.00		
58. Par	t 4: Total financial assets, line 36	\$700.00		
59. Par	t 5: Total business-related property, line 45	\$0.00		
60. Par	t 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Par	t 7: Total other property not listed, line 54 +	\$0.00		
62. Tot	al personal property. Add lines 56 through 61	\$11,180.00	Copy personal property total	\$11,180.00
63. Tot	al of all property on Schedule A/B. Add line 55 + line 62			\$11,180.00

Official Form 106A/B Schedule A/B: Property page 5

ы	II in this infor	nation to identify your case:	J		J T	I		
	ebtor 1							
	SDIOI I	Kimiontae R Conley First Name	Middle Name	L	ast Name			
	ebtor 2 oouse if, filing)	First Name	Middle Name		ast Name			
Ur	nited States Ba	nkruptcy Court for the: SOL	THERN DISTRICT OF	ILLIN	OIS			
	ase number _ known)					☐ Check if this is an amended filing		
O	fficial Fo	rm 106C						
		e C: The Prope	erty You Cla	im	as Exempt	4/19		
	Cricaai	c c. The Frope	ity iod old		as Exchipt	4/13		
the nee cas	property you I eded, fill out an se number (if k	isted on <i>Schedule A/B: Propert</i> d attach to this page as many on nown).	y (Official Form 106A/B) copies of <i>Part 2: Addition</i>	as yo nal Pa	our source, list the property that you age as necessary. On the top of any	additional pages, write your name and		
spe any fun exe	ecific dollar and a policable so applicable so applicable so applicable to a policable applicable a	mount as exempt. Alternative tatutory limit. Some exemption inlimited in dollar amount. Ho	ly, you may claim the fons—such as those for owever, if you claim an	ull fai healt exen	th aids, rights to receive certain b nption of 100% of fair market valu	ing exempted up to the amount of enefits, and tax-exempt retirement		
Pa	art 1: Identi	fy the Property You Claim as	Exempt					
1.	Which set o	f exemptions are you claimin	g? Check one only, eve	n if yo	our spouse is filing with you.			
	■ You are cl	aiming state and federal nonba	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)			
	☐ You are cl	aiming federal exemptions. 11	U.S.C. § 522(b)(2)					
2.		·		empt.	fill in the information below.			
		For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption						
		that lists this property	portion you own					
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
	Air Mattres	s, Furniture	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)		
	Line from Sc	hedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit			
	Laptop, Ce	II Phone	\$300.00		\$300.00	735 ILCS 5/12-1001(b)		
	Line from Sc	hedule A/B: 7.1		_	100% of fair market value, up to any applicable statutory limit			
		and shoes	\$150.00		\$150.00	735 ILCS 5/12-1001(a)		
	Line from Sc.	hedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit			
	Costume J	_	\$30.00		\$30.00	735 ILCS 5/12-1001(b)		
	Line from Sc	hedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit			
		Regions Bank	\$500.00		\$500.00	735 ILCS 5/12-1001(b)		
	Line from Sc	hedule A/B: 17.1		_				

Official Form 106C

100% of fair market value, up to any applicable statutory limit

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Deb	tor 1 K	imiontae R Conley		Case number (if known		
		scription of the property and line on e A/B that lists this property	Current value of the Amount of the exemption you claim Specific laws that all portion you own		Specific laws that allow exemption	
			Copy the value from Check only one box for each exemption. Schedule A/B			
	_	s: Regions Bank m Schedule A/B: 17.2	\$200.00	00.00 ■ \$200.00		735 ILCS 5/12-1001(b)
	Line noi	II Scriedule A/B. 17.2	☐ 100% of fair market value, up to any applicable statutory limit			
3.	•	claiming a homestead exemption to adjustment on 4/01/22 and every			led on or after the date of adjustme	ent.)
	■ No					
	☐ Yes	s. Did you acquire the property cover	ed by the exemption wi	thin 1	,215 days before you filed this case	9?
		No				
		Yes				

	Case.	19-30455-ikg Doc 1 Filed 04/	10/19 Page 1	7 01 57	
Fill in this informa	tion to identify you	r case:			
Debtor 1	Kimiontae R Co	nlev			
	First Name	Middle Name Last Name			
Debtor 2					
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Bank	ruptcy Court for the:	SOUTHERN DISTRICT OF ILLINOIS			
Case number					
(if known)				☐ Check	if this is an
				ameno	ded filing
Official Form	106D				
Official Form		\			
Schedule D	: Creditors	Who Have Claims Secured	by Property	<u>/</u>	12/15
		f two married people are filing together, both are eq			
is needed, copy the A number (if known).	dditional Page, fill it o	out, number the entries, and attach it to this form. O	n the top of any addition	al pages, write your na	me and case
1. Do any creditors ha	ive claims secured by	your property?			
☐ No. Check th	nis box and submit th	nis form to the court with your other schedules. Yo	ou have nothing else to	report on this form.	
■ Yes. Fill in al	II of the information I	pelow.	C	•	
	Secured Claims				
<u> </u>		were then are accurated alaim list the avaditor concretely	Column A	Column B	Column C
		nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, list	the claims in alphabetion	cal order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Regional Ad	cceptance Co	Describe the property that secures the claim:	\$15,878.00	\$9,000.00	\$6,878.00
Creditor's Name	<u> </u>	2013 Hyundai Elantra			
Attn: Bankr 1424 E Firet		As of the date you file, the claim is: Check all that			
Greenville,		apply.			
	ty, State & Zip Code	☐ Contingent ☐ Unliquidated			
rumber, euros, e.	i,, ciato a <u>Lip</u> codo	☐ Disputed			
Who owes the debt	? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgage or sec	cured		
Debtor 2 only		car loan)			
☐ Debtor 1 and Debt	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
$\hfill\square$ At least one of the		☐ Judgment lien from a lawsuit			
Check if this clair community debt		Other (including a right to offset)			
	Opened				
	09/15 Last				
Date debt was incurr	ed Active 02/19	Last 4 digits of account number 3501			
Add the Lillian		aliman A an dala mana Waite di se an la sala	645.07	0.00	
	=	olumn A on this page. Write that number here: the dollar value totals from all pages.	\$15,87		
Write that number l			\$15,87	8.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Case 13	9-30433-ikg	DOCI THEU 04/	10/19 Page 10	01 31	
Fill in this i	nformation to identify your	case:				
Debtor 1	Kimiontae R Conl	ev				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing	j) First Name	Middle Name	Last Name			
United State	es Bankruptcy Court for the:	SOUTHERN DIST	TRICT OF ILLINOIS			
Case number	er				□ CI	neck if this is an
					_	nended filing
Official F	orm 106E/F					
Schedu	le E/F: Creditors W	ho Have Un	secured Claims			12/15
Schedule D: (left. Attach th name and cas	Executory Contracts and Unexpi Creditors Who Have Claims Sect e Continuation Page to this page se number (if known). .ist All of Your PRIORITY Un	ured by Property. If me. If you have no info	nore space is needed, copy tl	he Part you need, fill it out, i	number the ent	ies in the boxes on the
1. Do any c	reditors have priority unsecure	d claims against you	?			
■ No. G	So to Part 2.					
☐ Yes.						
	ist All of Your NONPRIORIT	Y Unsecured Clain	ms			
3. Do any o	reditors have nonpriority unsec	ured claims against	you?			
□ No. Y	ou have nothing to report in this pa	art. Submit this form to	o the court with your other sche	dules.		
Yes.						
unsecure	f your nonpriority unsecured classed claim, list the creditor separately creditor holds a particular claim, li	for each claim. For ea	ach claim listed, identify what ty	pe of claim it is. Do not list cla	aims already incl	uded in Part 1. If more
						Total claim
4.1 Aa ı	ron Sales & Lease	Last 4	4 digits of account number			\$5,000.00
101	priority Creditor's Name 5 Cobb Place Blvd NW	When	n was the debt incurred?			
	nnesaw, GA 30144 hber Street City State Zip Code	As of	f the date you file, the claim is	s: Check all that apply		
	incurred the debt? Check one.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Debtor 1 only	□ co	ontingent			
	Debtor 2 only	☐ Ur	nliquidated			
	Debtor 1 and Debtor 2 only	☐ Di	isputed			
	At least one of the debtors and and	other Type	of NONPRIORITY unsecured	claim:		
	Check if this claim is for a comm		tudent loans			
deb Is th	t ne claim subject to offset?	report	bligations arising out of a separ t as priority claims	· ·	·	
■ 1	No	□ De	ebts to pension or profit-sharing	g plans, and other similar debt	S	
	⁄es	Ot	ther. Specify Debt			

Debt	or 1 Kimiontae R Conley		Case number (if known)		
4.2	Acima Credit Fka Simpl	Last 4 digits of account number	4502		\$366.00
	Nonpriority Creditor's Name 9815 Monroe Street 4th Floor Sandy, UT 84070	When was the debt incurred?	Opened 09/17 Last / 6/01/18	Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset? —	☐ Obligations arising out of a separeport as priority claims	· ·	•	
	No	Debts to pension or profit-sharing	g plans, and other similar deb	IS	
	Yes	Other. Specify Lease			
4.3	Ameren IL Nonpriority Creditor's Name	Last 4 digits of account number			Unknown
	PO Box 88034 Chicago, IL 60680	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce th	nat you did not	
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing	g plans, and other similar deb	(S	
	Yes	Other. Specify Utility			
4.4	Ameren Missouri	Last 4 digits of account number			Unknown
	Nonpriority Creditor's Name Bankruptcy Desk Code 310 PO Box 66881	When was the debt incurred?			
	Saint Louis, MO 63166 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	_			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	At least one of the debtors and another	Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce th	nat you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar deh	ts	
	■ No	Other Specify Debt	a prison and anot office dob	· -	
	∟ 1€3	Officer Specific DUDE			

Debtor	1 Kimiontae R Conley		Case number (if known)	
4.5	Axcess Financial	Last 4 digits of account number	9295	\$186.00
	Nonpriority Creditor's Name 7755 Montogomery Road Suite 400 Cincinnati OH 45336	When was the debt incurred?	Opened 11/18 Last Active 2/27/19	
-	Cincinnati, OH 45236 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.6	Check 'n Go Nonpriority Creditor's Name	Last 4 digits of account number		Unknown
	1415 North Grand Blvd Saint Louis, MO 63106	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Loan		
4.7	Credit Collection Services	Last 4 digits of account number	6358	\$190.00
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	Opened 3/24/14	
	725 Canton St Norwood, MA 02062 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	O continuent		
		☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	a Gianni.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	<u> </u>	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
	■ No			
	Yes	Other. Specify 06 Progres	sive	

Debtor	1 Kimiontae R Conley		Case number (if known)				
4.8	Diversified Consultants, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	5850	\$823.00			
	Attn: Bankruptcy Po Box 551268 Jacksonville, FL 32255	When was the debt incurred?	Opened 07/18 Last Active 02/17				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Collection	Attorney Att Mobility				
4.9	Diversified Consultants, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	1282	\$180.00			
	Attn: Bankruptcy Po Box 551268	When was the debt incurred?	Opened 10/18 Last Active 02/17				
	Jacksonville, FL 32255 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	,					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharin					
	Yes	Other. Specify Collection	Attorney Att U-Verse				
4.1	El (D)		0000	4075.00			
0	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number		\$675.00			
		When was the debt incurred?	Opened 07/14 Last Active 03/17				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	 ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not 					
	\square At least one of the debtors and another						
	☐ Check if this claim is for a community debt						
	Is the claim subject to offset?	report as priority claims	nation agreement of divolce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	■ Other. Specify Credit Card	I				

Debto	r 1 Kimiontae R Conley	Case number (if known)		
4.1				
1	Gateway Regional Medical Center	Last 4 digits of account number	\$1,000.00	
	Nonpriority Creditor's Name PO Box 503706	When was the debt incurred?		
	Saint Louis, MO 63150			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts		
	·			
	Yes	Other. Specify Debt		
4.1	Great Lakes	Last 4 digits of account number	Unknown	
	Nonpriority Creditor's Name			
	2401 International Lane Madison, WI 53704	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify Loan		
4.1	Jefferson Capital Systems, LLC	Last 4 digits of account number 0003	\$853.00	
3	Nonpriority Creditor's Name	Last 4 digits of account number 0003	φουσ.υυ	
	•	Opened 11/16 Last Active		
	Po Box 1999 Saint Cloud, MN 56302	When was the debt incurred? 04/16		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	\square Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	No	\square Debts to pension or profit-sharing plans, and other similar debts		
	□Yes	Factoring Company Account Victoria S Other. Specify Secret		
	□ 169	Other. Specify Secret		

tor 1 Kimiontae R Conley		Case number (if known)	
Jefferson Capital Systems, LLC	Last 4 digits of account number	9003	\$840.00
Nonpriority Creditor's Name	_		
Po Box 1999 Saint Cloud, MN 56302	When was the debt incurred?	Opened 11/16 Last Active 04/16	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharin		
Yes	Other. Specify Factoring (Company Account Express	
Justine Petersen Housi	Last 4 digits of account number	6497	\$2,166.00
Nonpriority Creditor's Name		Opened 11/16 Last Active	
1023 N Grand Blvd	When was the debt incurred?	09/17	
Saint Louis, MO 63106	= A. (61) - Let - (61) - (1) - (1)		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
Debtor 1 only	Пол		
	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	Obligations arising out of a sepa	uration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Unsecured		
LVNV Funding/Resurgent Capital	Last 4 digits of account number	5392	\$1,035.00
Nonpriority Creditor's Name			Ψ1,000.00
Attn: Bankruptcy Po Box 10497	When was the debt incurred?	Opened 12/16 Last Active 2/28/19	
Greenville, SC 29603 Number Street City State Zip Code	As of the date you file, the claim	is: Chock all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim	s. Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	_ Factoring (Company Account Credit One	
☐ Yes	Other. Specify Bank N.A.	- •	

Official Form 106 E/F

1 Kimiontae R Conley		Case number (if known)	
Malland Lake			Umlemann
Mallard Lake Nonpriority Creditor's Name	Last 4 digits of account number		Unknow
135 Mallard Dr.	When was the debt incurred?		
Granite City, IL 62040			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
☐ Yes	Other. Specify Rent		
Midland Funding	Last 4 digits of account number	5720	\$633.0
Nonpriority Creditor's Name		Opened 02/17 Last Active	
2365 Northside Dr Ste 300 San Diego, CA 92108	When was the debt incurred?	06/16	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
_	_		
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Factoring (Bank	Company Account Comenity	
Midland Funding		9003	\$360.0
Nonpriority Creditor's Name	Last 4 digits of account number		φ300.0
2365 Northside Dr Ste 300	When was the debt incurred?	Opened 12/16 Last Active 04/16	
San Diego, CA 92108	- As a full a late of a file of a state.		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	IS: Check all that apply	
	-		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	d alatas	
At least one of the debtors and another	Type of NONPRIORITY unsecure	a ciaim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset? —	report as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
Пу		Company Account Synchrony	
Yes	Other. Specify Bank		

1 Kimiontae R Conley	Case number (if known)	
Progressive Leasing		Unknov
Nonpriority Creditor's Name	Last 4 digits of account number	Ulikilov
256 W Data Drive	When was the debt incurred?	
Draper, UT 84020		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Debt	
Regional Acceptance		Unknov
Nonpriority Creditor's Name	Last 4 digits of account number	Olikilo
655 Craig Road	When was the debt incurred?	
#348		
Saint Louis, MO 63141	As of the data was file the plains in Obselval that such	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_	П	
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes		
□ Yes	Other. Specify Debt	
St. Louis College of Health Careers	Last 4 digits of account number 5008	\$1,300.
Nonpriority Creditor's Name	WI II - I - I - I - I - I - I -	
11970 Borman Dr. STE 250	When was the debt incurred? 2018	
Saint Louis, MO 63146		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Debt	

Debto	r 1 Kimiontae R Conley		Case number (if known)	
4.2	T Mobile	Last 4 digits of account number		Unknown
3	Nonpriority Creditor's Name PO Box 629025 El Dorado Hills, CA 95762	Last 4 digits of account number When was the debt incurred?		<u> </u>
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Debt		
4.2	US Bank	Last 4 digits of account number		Unknown
	Nonpriority Creditor's Name 3303 Nameoki Rd.	When was the debt incurred?		
	Granite City, IL 62040 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	•		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Loan		
4.2 5	US Deptartment of Education/Great Lakes	Last 4 digits of account number	8581	\$24,774.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 7860 Madison, WI 53707	When was the debt incurred?	Opened 02/11 Last Active 2/28/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	Student loans	and the second s	
	ls the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other, Specify		

Educational

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Debtor '	1 Kimior	ntae	R Conley		Case r	number (if known)		
6	Bank/Ma	cy's		Last 4 digits of account number	573	0		\$475.00
	Nonpriority Attn: Bar Po Box 8 Mason, (nkru 3053	ıptcy B	When was the debt incurred?	Ope 05/1	ened 08/15 Las 6	st Active	
-	Number Str	eet C	ity State Zip Code ne debt? Check one.	As of the date you file, the claim	is: Che	ck all that apply		
	Debtor 1	l only	,	☐ Contingent				
	Debtor 2	2 only	,	☐ Unliquidated				
	Debtor 1	l and	Debtor 2 only	☐ Disputed				
	☐ At least	one o	of the debtors and another	Type of NONPRIORITY unsecure	ed claim	:		
	☐ Check in	f this	claim is for a community	☐ Student loans				
	debt		ject to offset?	☐ Obligations arising out of a sep report as priority claims	aration a	agreement or divorce	e that you did not	
	■ No			Debts to pension or profit-shari	ing plans	, and other similar d	ebts	
	☐ Yes			Other Specify Charge Ac				
4.2	Woodlan	nd F	orest National Bank	Last 4 digits of account number	,			Unknown
	Nonpriority		itor's Name	_				
	1530 US-		62260	When was the debt incurred?				
_		eet C	ozzog iity State Zip Code ne debt? Check one.	As of the date you file, the claim	is: Che	ck all that apply		
	■ Debtor 1			☐ Contingent				
	☐ Debtor 2	-		☐ Unliquidated				
	_		Debtor 2 only	☐ Disputed				
	_		of the debtors and another	Type of NONPRIORITY unsecure	ed claim	:		
			claim is for a community	☐ Student loans				
	debt		community	☐ Obligations arising out of a sep	aration a	agreement or divorce	e that you did not	
	Is the claim	1 sub	ject to offset?	report as priority claims Debts to pension or profit-shari	ing plans	and other similar d	ebts	
	☐ Yes			■ Other. Specify Loan	9	,		
				Other. Specify				
Part 3:	List Oth	ners	to Be Notified About a De	ot That You Already Listed				
is tryin have m	ng to collect nore than o	t fron	n you for a debt you owe to so	bout your bankruptcy, for a debt that meone else, list the original creditor i t you listed in Parts 1 or 2, list the add r submit this page.	n Parts	1 or 2, then list the	collection agency	here. Similarly, if you
	nd Address Bonewicz	,		On which entry in Part 1 or Part 2 did yo Line 4.16 of (Check one):	_	•		
	orth Orler			, ,		: Creditors with Prio	•	
	go, IL 606				Part 2	: Creditors with Non	priority Unsecured	Claims
				Last 4 digits of account number				
Part 4:	Add the	e An	nounts for Each Type of Ur	secured Claim				
	he amounts f unsecured			ms. This information is for statistical	reportin	g purposes only. 2	8 U.S.C. §159. Ad	d the amounts for each
		_				Tota	l Claim	
	otal	6a.	Domestic support obligations	5	6a.	\$	0.00	-
cla	ims							
from Pa		6b.	Taxes and certain other debts	=	6b.	\$	0.00	=
		6c. 6d.	•	injury while you were intoxicated secured claims. Write that amount here.	6c. 6d.	\$ *	0.00	-
		Ju.	2o	see. sa siamio. Witto that amount nere.	ou.	Ψ	0.00	-
		6e.	Total Priority. Add lines 6a thre	ough 6d.	6e.	\$	0.00	

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Debtor 1 Kimiontae R Conley

Case number (if known)

				Total Claim
	6f.	Student loans	6f.	\$ 24,774.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 16,082.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 40,856.00

ill in this infor	rmation to identify your	case:		
Debtor 1	Kimiontae R Con	ley		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	SOUTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.4	-				
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5	Jil,		Olato	211 0000	
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	_

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Fill in thi	s information to identify	your case:			
Debtor 1	Kimiontae R	Conley			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	iling) First Name	Middle Name	Last Name		
		that COUTUEDN DISTRICT	OF ILLINOIS		
United St	ates Bankruptcy Court for	the: SOUTHERN DISTRICT	OF ILLINOIS		
Case nun	nber				
(if known)					Check if this is an
					amended filing
Officia	al Form 106H				
Sche	dule H: Your C	Codebtors			12/15
00110	<u> </u>	- Cuobioi C			12/13
your nam	e and case number (if kn	n the boxes on the left. Attacl lown). Answer every question s? (If you are filing a joint case,	l.		o of any Additional Pages, write
■ No					
	-				
		re you lived in a community po siana, Nevada, New Mexico, Pu			states and territories include
720	a, Jamesa, Idane, <u>_</u>	olana, morada, mon moneo, m	iono moo, romao, rrao.		
`	o. Go to line 3.				
☐ Ye	es. Did your spouse, forme	r spouse, or legal equivalent live	e with you at the time?		
in lin Form	e 2 again as a codebtor	only if that person is a guarar	ntor or cosigner. Make	sure you have listed th	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebto	r		Column 2: The cre	ditor to whom you owe the debt
	Name, Number, Street, City, State			Check all schedule	
3.1				□ Sahadula D. lina	
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, li	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		
				D a	
3.2	Name			Schedule D, line	
				☐ Schedule E/F, li ☐ Schedule G, line	
	Number Chart				
	Number Street City	State	ZIP Code		

Fill	in this information to identify your	case:							
Deb	otor 1 Kimiontae	R Conley			_				
	otor 2 use, if filing)				_				
Unit	ted States Bankruptcy Court for th	ne: SOUTHERN DISTRIC	CT OF ILLINOIS		_				
(If kn	se number		-			Check if this is: An amended A supplement 13 income	ed filing ent showing	postpetition lowing date:	chapter
	fficial Form 106l					MM / DD/ Y	YYY		
	chedule I: Your Indias complete and accurate as po								12/15
sup _l	plying correct information. If youse. If you are separated and youch a separate sheet to this form	u are married and not filing wing spouse is not filing wing wing the top of any additions.	ng jointly, and your ith you, do not inclu	spouse is ide inforn	s living	g with you, incl about your spo	ude inform ouse. If mo	ation about re space is	your needed,
1.	Fill in your employment		Debtor 1			Dobtor (or non fili	ng chauca	
	information.		_			□ Emple		ng spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status*	■ Employed□ Not employed			☐ Not e	•		
	employers.	Occupation	Home Health A	ide					
	Include part-time, seasonal, or self-employed work.	Employer's name	Lifecare Misso	uri					
	Occupation may include student or homemaker, if it applies.	Employer's address	2190 S. Mason Saint Louis, MC						
		How long employed the		-	for A	dditional Emplo	yment Info	rmation	
Par	Give Details About Me	onthly Income							
	mate monthly income as of the use unless you are separated.	date you file this form. If y	you have nothing to ı	report for a	any lin	e, write \$0 in the	space. Incl	ude your noi	n-filing
	u or your non-filing spouse have r e space, attach a separate sheet t		ombine the information	on for all e	employ	ers for that perso	on on the lin	es below. If	you need
					F	or Debtor 1	For Deb non-filin	tor 2 or g spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$_	1,971.62	\$	N/A	
3.	Estimate and list monthly ove	rtime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$_	1,971.62	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

Deb	tor 1	Kimiontae R Conley	-		Case	number (if k	nown	_					
					For	Debtor 1			For De				
	Cop	y line 4 here	4.		\$	1,97	1.62		\$	_ 5 · I	N/A	_	
5.	l ist	all payroll deductions:											
0.	5a.	Tax, Medicare, and Social Security deductions	58	2	\$	210	0.99		\$		N/A		
	5b.	Mandatory contributions for retirement plans	5k		\$_		0.00	_	\$		N/A	_	
	5c.	Voluntary contributions for retirement plans	50		\$_		0.00	_	\$		N/A	_	
	5d.	Required repayments of retirement fund loans	50	d.	\$		0.00	_	\$		N/A	_	
	5e.	Insurance	56	Э.	\$		0.00	,	\$		N/A	_	
	5f.	Domestic support obligations	5f		\$		0.00	_	\$		N/A	<u> </u>	
	5g.	Union dues	50	_	\$		0.00	_	\$		N/A	_	
	5h.	Other deductions. Specify:	_ 5h	า.+	\$	(0.00	+	\$		N/A	<u>\</u>	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	210	0.99	<u></u>	\$		N/A	<u>\</u>	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,76	0.63	_	\$		N/A	<u>\</u>	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a	\$		0.00	•	\$		N/A		
	8b.	Interest and dividends	8k		\$_		0.00	_	\$		N/A	_	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$		0.00	_	\$		N/A	_	
	8d.	Unemployment compensation	80	d.	\$	(0.00		\$		N/A	_	
	8e.	Social Security	86	€.	\$		0.00	_	\$		N/A	<u>\</u>	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$		0.00	<u>)</u>	\$		N/A	<u>.</u>	
	8g.	Pension or retirement income	86	_	\$		0.00	_	\$		N/A	<u> </u>	
	8h.	Other monthly income. Specify: Ralph Lauren	_ 8ł	า.+	\$	350	0.00	+	\$		N/A	<u>\</u>	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	350	0.00] [\$		N/	Α	
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		2,110.63	1.[6		N/A	= \$	2 4 4 0	62
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ		2,110.03	+ :	' —		IN/A	= \$ _	2,110	.03
11.	State Included Other	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	dep		•					nedule 11.		0	.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies								12.	\$	2,110	.63
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?								Combi month	ined Iy incon	ne
	_	Voc. Evoloin:											—

Official Form 106l Schedule I: Your Income page 2

Debtor 1	Kimiontae R Conley	Case number (if known)
----------	--------------------	------------------------

Official Form B 6I Attachment for Additional Employment Information

Debtor		
Occupation		
Name of Employer	Ralph Lauren Retail	
How long employed	10/2018	
Address of Employer	9 Polito Ave	
. ,	Lyndhurst, NJ 07071	

Official Form 106l Schedule I: Your Income page 3

Fill	in this informa	tion to identify yo	our case:							
Debtor 1 Kimiontae R Conley						Check if this is: ☐ An amended filing				
1	otor 2 ouse, if filing)						•	ving postpetition chapter the following date:		
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF ILLINOIS							MM / DD / YYYY			
1	se number nown)									
	fficial Fo		_			•				
Be info	as complete a		possible eded, atta	If two married people ar ch another sheet to this						
Par 1.	t 1: Descr Is this a join	ibe Your House it case?	hold							
	■ No. Go to □ Yes. Doe	line 2. s Debtor 2 live i	•	ate household? al Form 106J-2, <i>Expens</i> es	s for Separate House	ehold of Debi	or 2.			
2.	Do you have	e dependents?	□ No							
	Do not list De Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?		
	Do not state dependents				Daughter		1	□ No ■ Yes		
					Son		8	□ No ■ Yes □ No		
					Daughter			■ Yes		
3.	expenses of	enses include f people other t d your depende	han 👝	No Yes				☐ Yes		
Est	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp						
the		n assistance an		government assistance i luded it on <i>Schedule I:</i> \			Your expe	enses		
 The rental or home ownership expenses for your residence. Include first me payments and any rent for the ground or lot. 						e 4. \$		268.00		
	If not includ	ed in line 4:								
		estate taxes rty, homeowner's	s, or renter	's insurance		4a. \$ 4b. \$		0.00		
	4c. Home	maintenance, re	pair, and ι	ıpkeep expenses		4c. \$		70.00		
5.		owner's associat nortgage payme		dominium dues our residence, such as ho	me equity loans	4d. \$ 5. \$		0.00 0.00		

ebtor 1	Kimiontae R Conley	Case num	ber (if known)	
Utilitie	s:			
	Electricity, heat, natural gas	6a.	\$	250.00
	Nater, sewer, garbage collection	6b.		100.00
	Felephone, cell phone, Internet, satellite, and cable services	6c.		250.00
	Other. Specify:	6d.	·	0.00
	and housekeeping supplies	7.	*	350.00
	are and children's education costs	8.	· <u> </u>	60.00
	ng, laundry, and dry cleaning	9.		140.00
	nal care products and services	10.		35.00
	al and dental expenses	11.	·	
	•	11.	Φ	50.00
	portation. Include gas, maintenance, bus or train fare. include car payments.	12.	\$	100.00
	ainment, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
	able contributions and religious donations	14.	· ·	0.00
. Insura	•	14.	Ψ	0.00
	include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	·	0.00
	/ehicle insurance	15c.		100.00
	Other insurance. Specify:	15d.		0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
Specify	/:	16.	\$	0.00
	ment or lease payments:		_	
	Car payments for Vehicle 1	17a.	· -	400.00
	Car payments for Vehicle 2	17b.	·	0.00
17c. (Other. Specify:	17c.	\$	0.00
17d. (Other. Specify:	17d.	\$	0.00
	ayments of alimony, maintenance, and support that you did not repor			0.00
	ted from your pay on line 5, Schedule I, Your Income (Official Form 10	61). 18.	· ·	
	payments you make to support others who do not live with you.		\$	0.00
Specify		19.		
	real property expenses not included in lines 4 or 5 of this form or on 5			
	Mortgages on other property	20a.		0.00
20b. F	Real estate taxes	20b.	· -	0.00
20c. F	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. N	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. H	Homeowner's association or condominium dues	20e.	\$	0.00
. Other:	Specify:	21.	+\$	0.00
	ate your monthly expenses			
	dd lines 4 through 21.		\$	2,173.00
	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106.	J-2	\$	
22c. Ad	dd line 22a and 22b. The result is your monthly expenses.		\$	2,173.00
. Calcul	ate your monthly net income.			
23a. (Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,110.63
	Copy your monthly expenses from line 22c above.	23b.	-\$	2,173.00
			·	_,
23c. S	Subtract your monthly expenses from your monthly income.		_	
	The result is your monthly net income.	23c.	\$	-62.37
For exa	a expect an increase or decrease in your expenses within the year after mple, do you expect to finish paying for your car loan within the year or do you expect ation to the terms of your mortgage?			se or decrease because o
■ No.				
☐ Yes	Explain here:			

Fill in th	nis inform	nation to identify your	case:			
Debtor 1	1	Kimiontae R Conl				
		First Name	Middle Name	Last Name		
Debtor 2	=					
(Spouse if,	, filing)	First Name	Middle Name	Last Name		
United S	States Bar	nkruptcy Court for the:	SOUTHERN DISTRIC	T OF ILLINOIS		
Case nu	ımber					
(if known)						☐ Check if this is an
						amended filing
		<u>106Dec</u> ion About a	n Individua	l Debtor's S	chedules	12/15
If two m	arried ped	ople are filing together	, both are equally resp	onsible for supplying co	rrect information.	
	•					
obtainin	g money		n connection with a bar			tement, concealing property, or 100, or imprisonment for up to 20
	Sign	Below				
Dio	d you pay	or agree to pay some	one who is NOT an atto	orney to help you fill out	bankruptcy forms?	
-	No					
	Yes. N	ame of person	kruptcy Petition Preparer's Notice,			
					Declaratio	n, and Signature (Official Form 119)
		ty of perjury, I declare true and correct.	that I have read the sur	mmary and schedules fil	ed with this declarat	ion and
X	/s/ Kimi	iontae R Conley				
				X		
	Kimion	tae R Conley		X Signature o	of Debtor 2	
					of Debtor 2	

	II to this to form							_	
		nation to identify you							
De	ebtor 1	Kimiontae R Co		dle Name	L	ast Name			
1 1	ebtor 2								
(Sp	oouse if, filing)	First Name	Midd	dle Name	L	ast Name			
Ur	nited States Bar	nkruptcy Court for the:	SOUTH	ERN DISTRICT OF	ILLING	DIS			
Ca	ase number								
(if k	known)							_	neck if this is an
								ar	nended filing
_	··· · · -	407							
	fficial For				_				
St	tatement	of Financial	Attairs	for Individu	uals	Filing for E	Bankrupt	су	4/1
		nd accurate as poss ore space is needed,							
		n). Answer every que		parate sneet to th	15 1011	i. On the top of al	iy additional p	ages, write you	i name and case
Pa	art 1: Give D	etails About Your Ma	arital Status	and Where You L	ived B	efore			
1.	What is your	ourrent merital state	10.2						
١.	vviiat is your	current marital statu	19 :						
	☐ Married								
	■ Not mar	ried							
2.	During the la	ast 3 years, have you	lived anyw	here other than wi	here y	ou live now?			
	□ No								
	Yes. List	t all of the places you l	ived in the la	ast 3 years. Do not	include	where you live no	w.		
	Debtor 1 Pri	ior Address:		Dates Debtor 1		Debtor 2 Prior A	ddress:		Dates Debtor 2
	Dobto: 1111	.o. /taa/000/		lived there		200101 21 1101 71	au oco.		lived there
	1104 Wate			From-To: 10/2017 to 3/201	12	☐ Same as Debtor	1		☐ Same as Debtor 1 From-To:
	East Saint	Louis, IL 62206		10/2017 10 0/20	.0				110111-10.
	74 Malland	D-		From To:					
	74 Mallard Hartford, II			From-To: 10/2016 to 9/20 1	17	☐ Same as Debtor	1		☐ Same as Debtor 1 From-To:
		_ 0_0.0							
3.		st 8 years, did you eves include Arizona, Ca							? (Community property
Sia	iles and territori	es include Anzona, Ca	illiorriia, iuai	io, Louisiaria, Neva	iua, ive	w Mexico, Fuelto F	RICO, TEXAS, VV	asilington and wi	isconsin.)
	■ No								
	☐ Yes. Ma	ke sure you fill out Sci	hedule H: Yo	our Codebtors (Office	cial For	m 106H).			
Pa	art 2 Explain	n the Sources of You	ır Income						
_									
4.		e any income from er I amount of income yo							dar years?
	If you are filin	g a joint case and you	have incom	e that you receive t	togethe	r, list it only once u	ınder Debtor 1.		
	□ No								
	Yes. Fill	in the details.							
			Debtor 1				Debtor 2		
			Sources	of income	Gross	sincome	Sources of	income	Gross income
			Check all t	hat apply.	(before exclusion)	e deductions and sions)	Check all th	at apply.	(before deductions and exclusions)

Official Form 107

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Debtor 1 Kimiontae R Conley					Case number (if known)				
				Debtor 1		Debtor 2			
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)	
		y 1 of curre filed for ba	ent year until inkruptcy:	■ Wages, commissions, bonuses, tips	\$6,806.01	☐ Wages, comr bonuses, tips	nissions,		
				☐ Operating a business		☐ Operating a b	ousiness		
		ndar year: o December	r 31, 2018)	■ Wages, commissions, bonuses, tips	\$27,203.59	☐ Wages, comr bonuses, tips	nissions,		
				☐ Operating a business		☐ Operating a b	ousiness		
		ndar year bo December		■ Wages, commissions, bonuses, tips	\$25,923.00	☐ Wages, comr bonuses, tips	nissions,		
				☐ Operating a business		☐ Operating a b	ousiness		
	■ No	source and	-	ome from each source separat	tely. Do not include income t	hat you listed in line	3 4.		
				Debtor 1		Debtor 2			
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco Describe below.	me	Gross income (before deductions and exclusions)	
Par	t 3: Lis	st Certain P	avments You	Made Before You Filed for I	Bankruptcv				
6.		er Debtor 1' Neither D	s or Debtor 2 Debtor 1 nor D	's debts primarily consumer Debtor 2 has primarily consu personal, family, or househol	debts? Imer debts. Consumer debt	s are defined in 11	U.S.C. § 10	01(8) as "incurred by an	
		_ ~	•	ore you filed for bankruptcy, di	d you pay any creditor a tota	l of \$6,825* or more	э?		
		□ No. □ Yes	Go to line 7 List below 6	'. each creditor to whom you pai	d a total of \$6,825* or more	in one or more payı	ments and t	the total amount you	
			paid that cr not include	editor. Do not include paymen payments to an attorney for the t on 4/01/22 and every 3 years	its for domestic support obliquis bankruptcy case.	gations, such as chi	ld support a	and alimony. Also, do	
	■ Yes	Debtor 1	or Debtor 2 o	or both have primarily consu	mer debts.		aajaaaman		
		_	•		a you pay any orealier a lole	ii or quou or more.			
		■ No.	Go to line 7		d = t-t-l =f #000 =	d 46-2 4-4-1		st annulitan De e	
		□ Yes	include pay	each creditor to whom you pai ments for domestic support ol this bankruptcy case.					
	Credito	r's Name ar	nd Address	Dates of payme	nt Total amount	Amount you	Was this	payment for	

Case number (if known)

7.	Within 1 year before you filed for bankrupto <i>Insiders</i> include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partner r more of their voting	erships of which g securities; and	you are a general any managing a	al partner; corporations gent, including one for
	□ No					
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment
	Debra Tucker 9001 Lebanon Rd. Apt 9c	3/2019	\$1,500.00	\$0.00) Sister	
	Belleville, IL 62223					
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi ■ No □ Yes. List all payments to an insider		ments or transfer a	any property or	account of a d	ebt that benefited an
	Insider's Name and Address	Dates of payment	Total amount	Amount you		this payment
			paid	still owe	e Include cred	itor's name
Pai	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
	St Louis Colle Ge Of Health Care vs KIMIONTAE CONLEY 18SLAC35008	CIVIL NEW FILING	ST LOUIS COU CIRCUIT COUR		☐ Pending ☐ On appe	al
					- 0.00	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address			oreclosed, garı		d, seized, or levied? Value of the property
11.	Within 90 days before you filed for bankrup	•		nancial instituti	on set off any	mounts from your
11.	accounts or refuse to make a payment beca No Yes. Fill in the details.		duling a ballk of the	ianciai msutuu	on, set on any a	imounts nom you
	Creditor Name and Address	Describe the action the	creditor took	Da tak	te action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at ■ No □ Yes		rty in the possess			efit of creditors, a

Official Form 107

Debtor 1 Kimiontae R Conley

Deb	otor 1 K	imiontae R Conley		Case number	er (if known)	
Par	t 5: Lis	et Certain Gifts and Contribution	ons			
13.	Within 2	years before you filed for ban	kruptcy,	did you give any gifts with a total value of more	e than \$600 per person	?
	Yes.	. Fill in the details for each gift.				
	Gifts wi	th a total value of more than \$6 son	600	Describe the gifts	Dates you gave the gifts	Value
	Person Address	to Whom You Gave the Gift ans:	d			
	Debra ⁻	Гucker		\$2000 to help her get a car	3/2019	\$2,000.00
	Person's	relationship to you: Sister				
14.	■ No	years before you filed for bank		did you give any gifts or contributions with a to	otal value of more than	\$600 to any charity?
	more the	•		Describe what you contributed	Dates you contributed	Value
			,40,			
Par	t 6: Lis	t Certain Losses				
15.	Within 1 or gamb		ruptcy o	r since you filed for bankruptcy, did you lose ar	nything because of thef	t, fire, other disaster,
	■ No	. Fill in the details.				
		e the property you lost and	Descr	ibe any insurance coverage for the loss	Date of your	Value of property
		loss occurred	Includ	e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	locc	lost
Par	t 7: Lis	t Certain Payments or Transfe	ers			
16.	consulte	d about seeking bankruptcy o	r prepari	id you or anyone else acting on your behalf paring a bankruptcy petition? rs, or credit counseling agencies for services requi		rty to anyone you
	□ No					
		. Fill in the details.				
	Address Email or	Who Was Paid s r website address Who Made the Payment, if Not	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	125 No Suite 1 Saint C	ne Law Firm, LLC rth Main Street 00 harles, MO 63304 klinelawstl.com		Attorney Fees	3/28/2019	\$600.00

Debtor 1	Kimiontae	R	Conley

Case number (if known)

17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No							
	☐ Yes. Fill in the details.							
	Person Who Was Paid Address	Description and vatransferred	alue of any prop	erty	Date payment or transfer was made	Amount of payment		
	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin Include both outright transfers and transfers made include gifts and transfers that you have already lis No	ness or financial affai as security (such as th	rs?					
	Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and va property transferre			any property or received or debts change	Date transfer was made		
	Person's relationship to you							
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protec ■ No □ Yes. Fill in the details.		property to a s	elf-settled tru	ust or similar device o	f which you are a		
	Name of trust	Description and value of the property transferred						
	Name of trust	Description and va	nue or the prop	erty transferr	ea	Date Transfer was made		
	List of Certain Financial Accounts, Instru Within 1 year before you filed for bankruptcy, w sold, moved, or transferred?	vere any financial acc	ounts or instru	ments held ir		, ,		
	Include checking, savings, money market, or or houses, pension funds, cooperatives, associated No				nares in banks, credit	unions, brokerage		
	☐ Yes. Fill in the details.							
		ast 4 digits of ecount number	Type of accour instrument	clo mo	ite account was osed, sold, oved, or insferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for	bankruptcy, any	/ safe deposi	t box or other deposit	ory for securities,		
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, State and ZIP Code)		Describe the	contents	Do you still have it?		
22.	Have you stored property in a storage unit or p No	ear before yo	ou filed for bankruptc	y?				
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or hat to it? Address (Number, State and ZIP Code)		Describe the	contents	Do you still have it?		

Debtor 1	Kimiontae	R	Conley	,

Case number (if known)

Par	19: Identify Property You Hold or Control for	Someone Else								
23.	Do you hold or control any property that someofor someone.	one else owns? Include any prope	ty you borrow	ed from, are storing fo	r, or hold in trust					
	■ No									
	☐ Yes. Fill in the details. Owner's Name Where is the property? Describe the property Value									
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the	: property	Value					
Par	10: Give Details About Environmental Inform	ation								
For	he purpose of Part 10, the following definitions	apply:								
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	ir, land, soil, surface water, groun								
_	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	sites.	-							
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazar	dous substance, toxic	substance,					
Rep	ort all notices, releases, and proceedings that ye	ou know about, regardless of whe	n they occurre	∍d.						
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in vi	iolation of an environm	ental law?					
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		mental law, if you	Date of notice					
25.	Have you notified any governmental unit of any release of hazardous material?									
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		mental law, if you	Date of notice					
26.	Have you been a party in any judicial or admini	strative proceeding under any env	ironmental law	v? Include settlements	and orders.					
	■ No □ Yes. Fill in the details.									
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the	e case	Status of the case					
Par	11: Give Details About Your Business or Con	nnections to Any Business								
27.	27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time									
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)							
	☐ A partner in a partnership									
	☐ An officer, director, or managing execu	tive of a corporation								
	☐ An owner of at least 5% of the voting or equity securities of a corporation									

Official Form 107

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Dei	otor 1 Kimiontae R Conley	G	ase number (if known)
	No. None of the above applies. Go toYes. Check all that apply above and fil	Part 12. I in the details below for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
28.	institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below.		anyone about your business? Include all financial
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
I had are with		false statement, concealing property, or	declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both.
	niontae R Conley nature of Debtor 1	Signature of Debtor 2	
Dat	e April 10, 2019	Date	
Did ■ N		ent of Financial Affairs for Individuals Fili	ng for Bankruptcy (Official Form 107)?
		t an attorney to help you fill out bankrupto	

Fill in this inform	nation to identify your	case:				
Debtor 1	Kimiontae R Con	lev				
	First Name	Middle Name		Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name		Last Name		
	inkruptcy Court for the:	SOUTHERN DIS	TDICT OF II I	INOIS		
Officed States Da	inkruptcy Court for the.	300THERN DIS	TRICT OF ILI			
Case number _						☐ Check if this is an
(II KIIOWII)					'	☐ Check if this is an amended filing
•					_	ŭ
Official Fo	rm 108					
		n for Indiv	viduale	Filing Under Chap	tor 7	40/45
Statemen	it of intentio	ii ioi iiidiv	viduais	Tilling Officer Chap	iei <i>i</i>	12/15
If you are an indi	ividual filing under cha	pter 7, you must fil	II out this for	m if:		
creditors have	e claims secured by yo	ur property, or				
	sed personal property a					
				r bankruptcy petition or by the date luse. You must also send copies to		
on the				·		·
•		r in a joint case, bo	oth are equal	ly responsible for supplying correc	t informati	on. Both debtors must
sign an	nd date the form.					
	and accurate as possib our name and case nu		s needed, at	ach a separate sheet to this form.	On the top	of any additional pages,
Part 1: List Yo	our Creditors Who Hav	e Secured Claims				
1. For any credite information be	-	art 1 of Schedule D	D: Creditors \	Who Have Claims Secured by Prope	∍rty (Officia	al Form 106D), fill in the
Identify the cre	editor and the property t	hat is collateral	What do y	you intend to do with the property t		id you claim the property s exempt on Schedule C?
			Secures a	dept:	a	s exempt on schedule C?
		_				
	egional Acceptance	Со		der the property.] No
name:				the property and redeem it.		Yes
Description of	2013 Hyundai Elar	ntra		the property and enter into a rmation Agreement.		- 100
property				the property and [explain]:		
securing debt:						
Part 2: List Yo	our Unexpired Persona	I Property Leases				
For any unexpire	ed personal property le	ase that you listed		G: Executory Contracts and Unexp		
				ses are leases that are still in effect loes not assume it. 11 U.S.C. § 365(period has not yet ended.
December was a					\A/:II 4L	e lease be assumed?
Describe your u	nexpired personal pro	perty leases			vviii tri	le lease de assumed?
Lessor's name:					☐ No	
Description of lea Property:	ased				☐ Ye	•
					ш те	5
Lessor's name:					□ No	
Description of lea Property:	ased				☐ Ye	c
-1 2-3-					⊔ Ye	3
Lessor's name:					□ No	
Official Form 108		Statement of In	ntention for I	ndividuals Filing Under Chapter 7		page ·

Statement of Intention for Individuals Filing Under Chapter 7

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Debto	or 1	Kimiontae R Conley	Case number (if known)
Desci	riptior	n of leased	
Prope			☐ Yes
Lesso		ame: n of leased	□ No
Prope		i or leased	☐ Yes
Lesso			□ No
Prope		n of leased	☐ Yes
Lesso		ame: n of leased	□ No
Prope	•	i or leased	☐ Yes
Lesso			□ No
Prope		n of leased	☐ Yes
Part 3	3:	Sign Below	
		alty of perjury, I declare that I ha at is subject to an unexpired lea	cated my intention about any property of my estate that secures a debt and any personal
X /	s/ Ki	imiontae R Conley	X
		ontae R Conley	Signature of Debtor 2
,	Signa	ture of Debtor 1	
I	Date	April 10, 2019	Date

Fill in	n this information to identify your case:				as directed in this form and	in Form
Debt	or 1 Kimiontae R Conley		122	2A-1Supp:		
Debt (Spou	or 2 se, if filing)			1. There is no p	presumption of abuse	
	ed States Bankruptcy Court for the: Southern District of	of Illinois	'	applies will b	on to determine if a presum be made under <i>Chapter 7 M</i> (Official Form 122A-2).	•
(if kno	e number wn)		_	☐ 3. The Means T	est does not apply now beditary service but it could app	
					is an amended filing	<i>1</i> 101011
Off	icial Form 122A - 1				3	
Ch	apter 7 Statement of Your Cur	rent Mor	nthly Inc	ome		12/15
attach case i	complete and accurate as possible. If two married people as a separate sheet to this form. Include the line number to wound the line number to wound the line number to wound the line seempted from the line service, complete and file Statement of Exempted Calculate Your Current Monthly Income	hich the additior m a presumption	nal information a of abuse becau	ipplies. On the top on the see you do not have	of any additional pages, write primarily consumer debts or	your name and because of
1.	What is your marital and filing status? Check one or	ıly.				
	■ Not married. Fill out Column A, lines 2-11.					
	$\hfill\square$ Married and your spouse is filing with you. Fill ou	ıt both Columns	A and B, lines	2-11.		
	$\hfill\square$ Married and your spouse is NOT filing with you.	You and your s	spouse are:			
	☐ Living in the same household and are not lega	Ily separated.	Fill out both Co	lumns A and B, lin	es 2-11.	
	☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are living apart for reasons that do not include evading.	egally separated	d under nonban	kruptcy law that ap	oplies or that you and your	
10 the	Il in the average monthly income that you received from all 1(10A). For example, if you are filing on September 15, the 6-me 6 months, add the income for all 6 months and divide the total ouses own the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 throusult. Do not include	ugh August 31. If the de any income amour	amount of your monthly income nt more than once. For example	e varied during e, if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and commission	ons (before all	\$ 2,249.4	4 \$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	payments from	a spouse if	\$ 0.0	0 \$	
4.	All amounts from any source which are regularly pa of you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	. Include regular I, your depende	contributions nts, parents,	\$ 0.0	0 \$	
5.	Net income from operating a business, profession,					
			otor 1			
	Gross receipts (before all deductions)	\$ 0.00 -\$ 0.00				
	Ordinary and necessary operating expenses Net monthly income from a business, profession, or far		Copy here ->	\$ 0.0	0 \$	
6	Net income from rental and other real property	Πφ		*	<u> </u>	
3.		Deb	otor 1			
	Gross receipts (before all deductions)	\$0.00				
	Ordinary and necessary operating expenses	-\$ 0.00				
	Net monthly income from rental or other real property	\$0.00	Copy here ->	\$		
7.	Interest, dividends, and royalties			\$ 0.0	0 \$	

Official Form 122A-1

Kimiontae R Conley				Case numb	er (<i>if known</i>)	-		
				Column A Debtor 1		Column Debtor 2		
nemployment compensation	on			\$	0.00	\$	3 1, 1 1 1 1	
o not enter the amount if you ne Social Security Act. Instead		nount received was a bene	fit unde	r				-
For you		\$0.	.00					
For your spouse		\$						
ension or retirement incomenefit under the Social Secur	ity Act.	•		\$	0.00	\$		_
ncome from all other source to not include any benefits re- eceived as a victim of a war comestic terrorism. If necessal total below.	ceived under the So rime, a crime agains	cial Security Act or payments thumanity, or internationa	nts Il or					
·				\$	0.00	\$		_
				\$	0.00	\$		_
Total amounts from se	eparate pages, if an	y.	+	. \$	0.00	\$		_
alculate your total current in ach column. Then add the tot			\$	2,249.44	+ \$_		_ = = \$_	2,249.44
							L	I current month
Determine Whether th							inco	me
2a. Copy your total current mMultiply by 12 (the number2b. The result is your annual	er of months in a yea	ar)		Cop	oy line 11 ∣		\$ x 2b. \$	2,249.44 12 26,993.28
alculate the median family			ne:					
•	• •		ps.					
ill in the state in which you liv	e.	IL						
ill in the number of people in	your household.	4						
ill in the median family incom o find a list of applicable med or this form. This list may also	ian income amounts	s, go online using the link s	specified	d in the sepai	rate instruc		3. \$	98,603.00
ow do the lines compare?								
4a. Line 12b is less th Go to Part 3.	nan or equal to line 1	13. On the top of page 1, ch	neck bo	x 1, There is	no presun	nption of ab	ouse.	
	than line 13. On the ill out Form 122A-2.	top of page 1, check box 2	2, The p	resumption o	of abuse is	determined	d by Form	122A-2.
Sign Below								
By signing here, I declare	under penalty of pe	erjury that the information o	n this s	tatement and	in any att	achments is	s true and	correct.
X /s/ Kimiontae R Col	nley							
Kimiontae R Conle Signature of Debtor 1 Date April 10, 2019	nley							
Kimiontae R Conle Signature of Debtor 1	nley y							

Debtor 1 Kimiontae R Conley

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 10/01/2018 to 03/31/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Compassionate Nursing Services

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$20,512.99 from check dated 9/30/2018. Ending Year-to-Date Income: \$25,156.04 from check dated 12/31/2018.

This Year:

Current Year-to-Date Income: \$0.00 from check dated 3/31/2019 .

 $Income \ for \ six-month \ period \ (Current+(Ending-Starting)): \ \underline{\$4,643.05} \ .$

Average Monthly Income: \$773.84 .

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Life Care Missouri

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$\frac{\\$0.00}{\$\$ from check dated \$\frac{9/30/2018}{\$\$ Ending Year-to-Date Income: \$\\$449.80 from check dated \$\frac{12/31/2018}{\$\$}.

This Year:

Current Year-to-Date Income: \$5,590.73 from check dated 3/31/2019

Income for six-month period (Current+(Ending-Starting)): **\$6,040.53**.

Average Monthly Income: \$1,006.76.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Ralph Lauren Retail

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$0.00 from check dated 9/30/2018.

Ending Year-to-Date Income: \$1,597.75 from check dated 12/31/2018

This Year:

Current Year-to-Date Income: \$1,215.28 from check dated 3/31/2019 .

 $Income \ for \ six-month \ period \ (Current+(Ending-Starting)): \ \underline{\$2,813.03} \ \ .$

Average Monthly Income: \$468.84 .

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankru

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy CourtSouthern District of Illinois

In r	e Kimiontae R	Conley		Case No		
111 1	e Killionae K	Conley	Debtor(s)	Case No		
	DI	SCLOSURE OF C	COMPENSATION OF ATT	ORNEY FOR I	DEBTOR(S)	
1.	compensation paid be rendered on beha	to me within one year befalf of the debtor(s) in cont	akr. P. 2016(b), I certify that I am the attempt of the petition in bankrupt templation of or in connection with the	cy, or agreed to be pa bankruptcy case is as	id to me, for servi	
	For legal servi	ces, I have agreed to acce	pt	\$	600.00	-
	Prior to the fili	ing of this statement I hav	re received	\$	600.00	-
	Balance Due			\$	0.00	-
2.	The source of the co	ompensation paid to me w	vas:			
	■ Debtor	☐ Other (specify):				
3.	The source of comp	pensation to be paid to me	is:			
	Debtor	☐ Other (specify):				
4.	■ I have not agree	ed to share the above-disc	closed compensation with any other pers	on unless they are me	mbers and associa	ates of my law firm.
			ed compensation with a person or person st of the names of the people sharing in			f my law firm. A
5.	In return for the ab	ove-disclosed fee, I have	agreed to render legal service for all asp	ects of the bankruptc	y case, including:	
	b. Preparation and	filing of any petition, sch of the debtor at the meetin	n, and rendering advice to the debtor in ledules, statement of affairs and plan what of creditors and confirmation hearing	nich may be required;	-	bankruptcy;
6.	By agreement with	the debtor(s), the above-d	lisclosed fee does not include the follow	ring service:		
			CERTIFICATION			
	I certify that the for bankruptcy proceedi		ement of any agreement or arrangement	for payment to me for	r representation of	f the debtor(s) in
	April 10, 2019		/s/ Andrew Sti	linovic		
_	Date		Andrew Stiling	vic 66606		
			Signature of Atto The Kline Law	•		
			125 North Mair			
			Suite 100 Saint Charles,	MO 63304		
			•	Fax: 636-489-0386		
			leigh@klinelav			
			Name of law firn	ı		

United States Bankruptcy Court Southern District of Illinois

n re	Kimiontae R Conley		Case No.		
		Debtor(s)	Chapter 7		
	VERIFICATION OF CREDITOR MATRIX				
	The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of my/our knowledge and that it corresponds to the creditors listed in my/our schedules.				
Date:	April 10, 2019	/s/ Kimiontae R Conley Kimiontae R Conley			
		Signature of Debtor			

Aaron Sales & Lease 1015 Cobb Place Blvd NW Kennesaw, GA 30144

Acima Credit Fka Simpl 9815 Monroe Street 4th Floor Sandy, UT 84070

Ameren IL PO Box 88034 Chicago, IL 60680

Ameren Missouri Bankruptcy Desk Code 310 PO Box 66881 Saint Louis, MO 63166

Axcess Financial 7755 Montogomery Road Suite 400 Cincinnati, OH 45236

Check 'n Go 1415 North Grand Blvd Saint Louis, MO 63106

Credit Collection Services Attn: Bankruptcy 725 Canton St Norwood, MA 02062

Diversified Consultants, Inc. Attn: Bankruptcy
Po Box 551268
Jacksonville, FL 32255

First Premier Bank

Gateway Regional Medical Center PO Box 503706 Saint Louis, MO 63150

Great Lakes 2401 International Lane Madison, WI 53704

Jefferson Capital Systems, LLC Po Box 1999 Saint Cloud, MN 56302

John Bonewicz 350 North Orlenas #300 Chicago, IL 60654

Justine Petersen Housi 1023 N Grand Blvd Saint Louis, MO 63106

LVNV Funding/Resurgent Capital Attn: Bankruptcy Po Box 10497 Greenville, SC 29603

Mallard Lake 135 Mallard Dr. Granite City, IL 62040

Midland Funding 2365 Northside Dr Ste 300 San Diego, CA 92108

Progressive Leasing 256 W Data Drive Draper, UT 84020

Regional Acceptance 655 Craig Road #348 Saint Louis, MO 63141

Regional Acceptance Co Attn: Bankruptcy 1424 E Firetower Rd Greenville, NC 27858 St. Louis College of Health Careers 11970 Borman Dr. STE 250 Saint Louis, MO 63146

T Mobile PO Box 629025 El Dorado Hills, CA 95762

US Bank 3303 Nameoki Rd. Granite City, IL 62040

US Deptartment of Education/Great Lakes Attn: Bankruptcy Po Box 7860 Madison, WI 53707

Visa Dept Store National Bank/Macy's Attn: Bankruptcy Po Box 8053 Mason, OH 45040

Woodland Forest National Bank 1530 US-50 O Fallon, IL 62269